

CANCELLATION OF NOTICE

Please complete this form should you wish to cancel the "Notice to cancel lease agreement" form previously completed.

If you require assistance in completing this application form, please contact Customer Services on 08611 23426.

1. ACCOMMODATION

Building: _____ Unit No: _____ Unit Type: _____

Date Notice was served: _____ Vacating Date: _____

Lease Start Date: _____ (* must be completed)

Reason for cancellation of notice: _____

Parking Bay No: _____ (If applicable)

2. TENANT DETAILS

First Names: _____

Surname: _____

ID / Passport No: _____

Work Tel No: _____

Cell No: _____

Email: _____

3. TERMS AND CONDITIONS

- a. In the event of the tenant cancelling any notice previously served, the tenant will be required to vacate the premises if the premises has already been re-let to another tenant. Afhco may offer the Tenant an alternative premises, but cannot guarantee that this premises will be at the same cost.
- b. Should the tenant accept alternative accommodation, the tenant shall vacate the original premises together with all belongings and possessions by not later than 12h00 on the last day of this lease.
- c. Should the tenant not vacate the premises by 12h00 on the last day of the lease, the landlord or its agents reserves the right to claim any and all damages arising therefrom.
- d. The tenant may be required to sign a new lease for the new premises.
- e. Should the tenant not be willing to accept alternative premises then the notice previously served will stand.

Signature: _____
Tenant

Date: _____ (Not valid unless signed)

Signature: _____
Building Manager

Date: _____ (Not valid unless signed)

Signature: _____
Credit Control

Date: _____

Signature: _____
Debtors

Date: _____